

# DEVELOPER APPLICATION

## FOR REGISTRATION OF TIME SHARE PLAN

FOR OFFICE USE

Received \_\_\_\_\_  
Accepted \_\_\_\_\_  
Reg. No. \_\_\_\_\_

1. Time share property or plan

a. Name \_\_\_\_\_

b. Location \_\_\_\_\_  
(Include mailing address)

c. Is the plan a multiple location time share plan? ..... ☐ YES ☐ No  
If "yes," name the jurisdictions in which the plan's facilities are located \_\_\_\_\_

2. Name of applicant \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Applicant is: ☐ individual ☐ corporation ☐ limited liability company (LLC)  
☐ partnership ☐ joint venture ☐ limited liability partnership (LLP)

<u>Name of officers/partners/members/managers</u>	<u>Title</u>	<u>Address</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Registered with the State Business Registration Division as a:

☐ corporation ☐ partnership ☐ joint venture ☐ LLC ☐ LLP

Date of registration \_\_\_\_\_

3. Responsible managing employee(s):

_____ <i>Name</i>	_____ <i>Address</i>	_____ <i>Phone</i>
_____ <i>Name</i>	_____ <i>Address</i>	_____ <i>Phone</i>
_____ <i>Name</i>	_____ <i>Address</i>	_____ <i>Phone</i>

NOTE: Describe duties, functions, etc., of RME(s) on a separate sheet.

4. Applicant is also: ☐ acquisition agent ☐ sales agent ☐ plan manager

5. If applicant is not also the acquisition agent, sales agent or plan manager, complete the following:

Acquisition agent \_\_\_\_\_  
Name

\_\_\_\_\_ *Mailing Address (include suite no. & zip code)*

Sales agent \_\_\_\_\_  
Name

\_\_\_\_\_ *Mailing Address (include suite no. & zip code)*

Plan manager \_\_\_\_\_  
Name

\_\_\_\_\_ *Mailing Address (include suite no. & zip code)*

6. Applicant's attorney \_\_\_\_\_  
Name

\_\_\_\_\_ *Mailing Address (include suite no. & zip code)*

\_\_\_\_\_ *Phone*

7. Nature of time share plan: ☐ right to use ☐ ownership

a. No. of units \_\_\_\_\_  
No. of time share interests in each unit \_\_\_\_\_  
No. of week(s) in a time share interest \_\_\_\_\_

b. Geographical location:

- ☐ hotel  
☐ designated for hotel use  
☐ designated for resort use  
☐ designated for transient vacation rentals

8. The developer's interest in the time share property \_\_\_\_\_ an option to purchase.  
(is or is not)

9. Briefly state manner in which title to the time share property is held

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*(Attach separate sheet if necessary.)*

10. Indicate method under section 514E-19, HRS, by which purchasers are protected against blanket liens on the time share property \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. Escrow account established at \_\_\_\_\_  
*Name*

\_\_\_\_\_  
*Mailing Address (include suite no. & zip code)*

\_\_\_\_\_  
*Phone*

\_\_\_\_\_  
*Account No.*

\_\_\_\_\_  
*Date Established*

12. Name and address of nonprofit time share owners organization, club or association

\_\_\_\_\_  
*Name*

\_\_\_\_\_  
*Mailing Address (include suite no. & zip code)*

\_\_\_\_\_  
*Phone*

Date established \_\_\_\_\_

13. The following questions apply to the applicant and/or its partners, officers, directors, members, managers, and RME(s):

- a. In the past twenty years, have you been convicted of a crime in which the conviction has not been annulled or expunged, in this State or in any other state? ..... ☐ YES ☐ NO  
If "yes," provide information on the date, place and type of conviction on a separate sheet.
- b. Was any license, in this State or any other state, suspended or revoked at any time? ..... ☐ YES ☐ NO  
If "yes," in what state(s) \_\_\_\_\_ and briefly describe on a separate sheet.
- c. Is there any administrative action pending against you in this State or any other state? ..... ☐ YES ☐ NO  
If "yes," in what state(s) \_\_\_\_\_ and briefly describe on a separate sheet.
- d. Was any application for license denied in this State or any other state? ..... ☐ YES ☐ NO  
If "yes," in what state(s) \_\_\_\_\_ and briefly describe on a separate sheet.
- e. Have any complaints or charges ever been filed against you, regardless of outcome, in this State or any other state? ..... ☐ YES ☐ NO  
If "yes," in what state(s) \_\_\_\_\_ and briefly describe on a separate sheet.
- f. Have you ever filed for bankruptcy? ..... ☐ YES ☐ NO  
If "yes," in what state(s) \_\_\_\_\_ and briefly describe on a separate sheet.

I hereby certify that the statements and answers on this application and accompanying documents are true and correct. I understand that any misrepresentation shall constitute grounds for refusal or subsequent revocation of license. (Section 710-1017, Hawaii Revised Statutes)

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature of Developer*

\_\_\_\_\_  
*Print Name and Title*

# DEVELOPER APPLICATION FOR REGISTRATION OF TIME SHARE PLAN

## INSTRUCTIONS & INFORMATION

1. This form is to be used by a developer for registration of a time share plan. The developer's application must be submitted with the documents specified in the "*Check List for Developer Registration*" disseminated by the Department.
2. The Director will not receive this application unless the applicant has completed every statement in the application and the application is accompanied by the documents specified in the above-mentioned "*Check List for Developer Registration*."
3. Two (2) complete sets of the application must be submitted.
4. The Director will act upon this application within 60 days after receipt of a complete application.
5. If the applicant is a corporation, partnership, joint venture, limited liability company (LLC), or limited liability partnership (LLP), the applicant must designate a responsible managing employee (RME).
6. Please attach payment of registration fees in the amount specified in Section 16-53-40.3, Hawaii Administrative Rules, *Fees Relating to Boards and Commissions*, as follows:

\$750 Application (nonrefundable)  
\$750 Registration  
\$150 Compliance Resolution Fund, PLUS \$200 for each unit in the time share plan up through twenty-five units.

In addition to the above fees, payment of an initial deposit to cover the cost of the consultant review of the developer's application for registration must be submitted as authorized under Section 514E-10.5, Hawaii Revised Statutes. Additional sums may be required if the cost of the review exceeds the initial deposit. All funds in excess of the final cost of such review will be refunded to the developer.

The above-prescribed fees shall be paid in the form of a check payable to "*Department of Commerce and Consumer Affairs*."

7. Mail or deliver all required items to:

Time Share Program  
Department of Commerce and Consumer Affairs  
1010 Richards Street, P. O. Box 3469  
Honolulu, Hawaii 96801